

ISSUE SLIP STAPLE AREA (Additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | NW | 71534 | 10-9-89 |
| O.I.P.E. CLASSIFIER | | 69134 | 10-18-89 |
| FORMALITY REVIEW | J.S. | | |

INDEX OF CLAIMS

☐ Rejected
☐ Allowed
☐ Canceled
☐ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

BEST AVAILABLE COPY

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